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Bib Data Sheet

CONFIRMATION NO. 4449

SERIAL NUMBER 09/936,859	FILING DATE 11/15/2001 RULE	CLASS 604	GROUP ART UNIT 3701 <i>KC</i> 3763 <i>KC</i>	ATTORNEY DOCKET NO. P 0283672
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APPLICANTS

Derek J. Shaw, Macclesfield, UNITED KINGDOM;
Brian R.Law, Leicester, UNITED KINGDOM;

Yes KC

** CONTINUING DATA *****

THIS APPLICATION IS A 371 OF PCT/GB01/00590 02/13/2001

Yes KC

** FOREIGN APPLICATIONS *****

UNITED KINGDOM 0003790.3 02/18/2000

Yes KC

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 29	TOTAL CLAIMS <i>18/20</i>	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no Met after Allowance	Examiner's Signature <i>KC</i>	Initials <i>KC</i>		

ADDRESS

00909

TITLE

Automatically operable safety shield system for syringes

FILING FEE RECEIVED 1270	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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